

**SUNNYVALE SENIOR SITIZEN GOLF CLUB  
SSSGC**

Check one:  **Renewal - Please Renew by Oct 31**  
 **New Member**

**FOR YEAR \_\_\_ 2019 \_\_\_ (Yearly Dues \$85)**

DATE \_\_\_\_\_

NAME \_\_\_\_\_  
(Last Name) (First Name) (Middle Initial)

NCGA GHIN \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

**NEW MEMBERS - PLEASE FILL OUT BELOW**

DATE OF BIRTH \_\_\_\_\_ NCGA GHIN (if you have one) \_\_\_\_\_

WIFE'S/PARTNER'S NAME \_\_\_\_\_  
(Optional; Used for social events, e.g. annual dinner meeting)

How did you hear about SSSGC?  At Sunnyvale course  SSSGC.org website  
 From Friend/Member *(if referred by a SSSGC member, please provide his name as he may be eligible for an award)* \_\_\_\_\_  
 Ad in paper  Other \_\_\_\_\_

**MAKE CHECK PAYABLE TO SSSGC. SEND THIS FORM AND CHECK TO:**

VICTOR REID  
480 AZALEA WAY  
LOS ALTOS, CA 94022

<p><b>DO NOT FILL OUT - FOR SSSGC USE:</b></p> <p>CHECK #: _____</p> <p>AMOUNT: _____</p> <p>DATE: _____</p> <p>GHP. GHIN: _____</p> <p>SOCIAL ROSTER: _____</p>
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